

PROJECT DATA

PROJECT NAME: _____

PROJECT ADDRESS: _____

Please check all boxes that apply:

- ☐ New Construction ☐ New Addition
☐ Renovation ☐ Tenant Lay-out

1. Code Edition: ☐ 199__ USBC ☐ OTHER: _____

2. Building Use:
Currently Approved _____
Proposed _____

3. Use Group of Space within Scope of Work:

<input type="checkbox"/> A-1	<input type="checkbox"/> A-2	<input type="checkbox"/> A-3	<input type="checkbox"/> A-4	<input type="checkbox"/> A-5
<input type="checkbox"/> B	<input type="checkbox"/> E	<input type="checkbox"/> F-1	<input type="checkbox"/> F-2	
<input type="checkbox"/> H-1	<input type="checkbox"/> H-2	<input type="checkbox"/> H-3	<input type="checkbox"/> H-4	
<input type="checkbox"/> I-1	<input type="checkbox"/> I-2	<input type="checkbox"/> I-3	<input type="checkbox"/> M	
<input type="checkbox"/> R-1	<input type="checkbox"/> R-2	<input type="checkbox"/> R-3	<input type="checkbox"/> S-1	<input type="checkbox"/> S-2

4. Mixed Use Building?
☐ No ☐ Yes: Other Use Groups _____

5. Type of Construction:

<input type="checkbox"/> 1A	<input type="checkbox"/> 1B	<input type="checkbox"/> 2A	<input type="checkbox"/> 2B	<input type="checkbox"/> 2C
<input type="checkbox"/> 3A	<input type="checkbox"/> 3B	<input type="checkbox"/> 4	<input type="checkbox"/> 5A	<input type="checkbox"/> 5B
<input type="checkbox"/> CABO, 1&2 Family Dwelling				
<input type="checkbox"/> Other _____				

6. Total Floor Area Within the Scope of Work: _____ Sq.Ft.

7. Building Area, total (gross): _____ Sq.Ft.

8. Number of Stories: _____

9. Is the Building Sprinklered?: ☐ No ☐ Yes - specify:
☐ Full ☐ Partial
☐ NFPA 13 ☐ NFPA 13R ☐ NFPA 13D

10. Fire Alarm:
☐ Existing ☐ Altered ☐ Proposed ☐ None

11. Standpipes:
☐ Existing ☐ Altered ☐ Proposed ☐ None

12. Other Fire Protection Systems:
☐ No ☐ Yes
(specify) _____

13. ADA Status of Building:
☐ Exempt ☐ Fully Accessible ☐ Partially Accessible
☐ Proposed Compliance (specify items) _____

14. Plans submitted:

<input type="checkbox"/> Architectural	<input type="checkbox"/> Structural	<input type="checkbox"/> Electrical
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Fire Protection System

CITY OF ALEXANDRIA

PROJECT DATA COVERSHEET



CODE ENFORCEMENT BUREAU

301 KING STREET, SUITE 4200
ALEXANDRIA, VIRGINIA 22314

CALL MISS UTILITY BEFORE YOU DIG!!
1-800-257-7777 or 301/470-2757

- Plan approval is for permit issuance and is subject to the conditions and correction notes listed on this cover sheet. Issuance of a permit authorizes the approved work to proceed in accordance with adopted codes. The permit/approved plans do not preclude the inspectors from ordering corrections to meet code standards when such deficiencies are noted in the field.
- No changes to the approved plans will be made without written approval from the Code Enforcement Bureau.
- Permit(s) must be posted on the job site at all times.
- No inspections shall be made unless an approved set of plans is on the job site.
- Lot location surveys/wall checks, must be submitted before the framing inspection may take place.
- Inspections may be scheduled or canceled using the 24 hour "ACCESS" system: **703/838-4900**. Inspection results and permit/plan status are also available through "ACCESS".
- The Certificate of Use and Occupancy must be issued before the building may be used, stocked or occupied.

TO BE COMPLETED BY CITY of ALEXANDRIA STAFF

- SUP #: _____ Date expires: _____
- Subdivision Plan #: _____ ☐ N/A
- Released Site Plan: ☐ No ☐ Yes - Date _____
- Soils Report Required?: ☐ No ☐ Yes -Date Rec'd _____
- Permit Number: _____
- Certificate of Occupancy required?: ☐ No ☐ Yes

• Approval Conditions: